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APPLICANTS				•		-			
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** CONTINUING I	DATA	·	*			· 			·
** FOREIGN APPLICATIONS ************************************									
IF REQUIRED, F0 ** 04/26/2004	OREI	GN FILING LICENSE	Grante	ED				,	
Foreign Priority claimed yes no state STATE				STATE OR	SHE	ETS	TOTAL		INDEPENDENT
met Verified and Acknowledged		yes Ino Met aft	er tials	COUNTRY WA		WING 3	CLAI 79		CLAIMS 4
ADDRESS MEDTRONIC EM 11811 WILLOWS P.O. BOX 97006 REDMOND , WA 98073-9706	ROA	ENCY RESPONSE SY D N.E.	STEMS	INC.	÷				
TITLE Apparatus and me	ethod	s for documenting my	ocardial i	schemia	•				
l I	No to charge/credit DEPOSIT ACCOUNT 1.17 Fees (Processing Ext. of time)								

Other
 ☐ Credit